NAME

ADDRESS

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

ST 6194

PERMIT NUMBER

001 – discharge to Hazel

Dell Sewer District
DISCHARGE NUMBER

Submit Quarterly

NOTE: Read instructions before completing this form.

Vancouver, WA 98666-0933
COUNTY Clark
FACILITY

P.O. Box 933

Pro-Tech Industries

FR OM

	MONITORING PERIOD												
	YEAR	МО	DAY		YEAR	MO	DAY						
R M			01	TO									
_	(20-21)	(22-23)	(24-25)	<u>-</u>	(26-27)	(28-29)	(30-31)						

PARAMETER		(3 Card Only) (46-53)	QUANTITY OR LOA (54-61)	DING	(4 Card Only) (38-45)	ONCENTRA (54-6			NO.	MINIMUM FREQUENCY	SAMPLE	
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	MONTHLY AVERAGE	MAXIMU DAILY	M U	INITS	EX.	OF ANALYSIS	TYPE
Flow	SAMPLE MEASUREMENT											
1100	PERMIT REQUIREMENT	200	750	gpd						0	Continuous	Metered
рН	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT				6.0		9.0	:	s.u.	0	Continuous	Metered
5-day Biochemical Oxygen Demand	SAMPLE MEASUREMENT											
(BOD₅)	PERMIT REQUIREMENT						240	r	ng/L	0	01/90	Grab
Arsenic	SAMPLE MEASUREMENT											
Alsenie	PERMIT REQUIREMENT						0.1	r	ng/L	0	01/90	Grab
Cadmium, total	SAMPLE MEASUREMENT											
Gadiniani, total	PERMIT REQUIREMENT					0.07	0.11	r	ng/L	0	Continuous Continuous 01/90 01/90 01/90 01/90	Grab
Chlorine Demand	SAMPLE MEASUREMENT										ANALYSIS Continuous Continuous 01/90 01/90 01/90 01/90 01/90 D.	
Chlorine Demand	PERMIT REQUIREMENT						20	r	ng/L	0	01/90	Grab
Chromium, total	SAMPLE MEASUREMENT											
Cilionium, total	PERMIT REQUIREMENT					1.71	1.7	r	ng/L	0	01/90	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		ARED UNDER MY DIRECT SNED TO ASSURE THA UATED THE INFORMATION ONS WHO MANAGE THE S ERING INFORMATION, THE	LAW THAT THIS DOCUMENT AFTION OR SUPERVISION IN ACC T QUALIFIED PERSONNEL F I SUBMITTED. BASED ON MY I FYSTEM OR THOSE PERSONS IS EINFORMATION SUBMITTED IS, E, ACCURATE, AND COMPLETI	CORDANCE WITH PROPERLY GATH NQUIRY OF THE DIRECTLY RESPO TO THE BEST OF	I A SYSTEM IERED AND PERSON OR NSIBLE FOR MY				TELEPHO	DNE		DATE
TYPED OR PRINTED	ARE POSS	SIGNIFICANT PENALTIES IBILITY OF FINE AND IMPR AND 33 USC § 1319. (PENA	FOR SUBMITTING FALSE INF ISONMENT FOR KNOWING VIOL ALTIES UNDER THESE STATUE	ORMATION, INCI ATIONS. SEE 18 S MAY INCLUDE I	UDING THE USC §	GNATURE OF PRINCIPAL EXECUTIVE AREA		NII.	JMBER	VEAR	MO DAY	
COMMENT AND EXPLANATION OF A	\$10,00		IPRISONMENT OF BETWEEN SIX	(MONTHS AND F		FFICER OR AUTHORIZE		CODE	N	OWDEK	ILAN	mo DAT

DISCHARGE MONITORING REPORT (DMR)

(17-19)

Pro-Tech Industries NAME P.O. Box 933 **ADDRESS**

Vancouver, WA 98666-0933

Clark COUNTY

FACILITY LOCATION ST 6194

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FR OM			01	TO										
	(20-21)	(22-23)	(24-25)	_	(26-27)	(28-29)	(30-31)							

PARAMETER		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)				NO.	MINIMUM FREQUENCY	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	MONTHLY AVERAGE	MAXIMUI DAILY	M UNI	TS	EX.	OF ANALYSIS	TYPE
Copper, total	SAMPLE MEASUREMENT											
Copper, total	PERMIT REQUIREMENT					2.07	2.2	mg	J/L	0	01/90	Grab
Cyanide, total	SAMPLE MEASUREMENT											
- Cyamac, total	PERMIT REQUIREMENT					0.65	0.2	mg	J/L	0	01/90 01/90 01/90 01/90 01/90 01/90 01/90 01/90	Grab
Iron	SAMPLE MEASUREMENT						DETERMINE MAXIMUM DAILY UNITS EX. OF ANALYSIS					
11011	PERMIT REQUIREMENT						10	mg	J/L	0	O. FREQUENCY OF ANALYSIS O 01/90 DA	Grab
Lead, total	SAMPLE MEASUREMENT										01/90 01/90 01/90 01/90 01/90 01/90 01/90 Date	
Ecac, total	PERMIT REQUIREMENT					0.43	0.4	mg	J/L	0 01/90	Grab	
Nickel, total	SAMPLE MEASUREMENT										01/90 01/90 01/90 01/90 01/90 01/90 01/90 01/90 01/90 Dat	
Mickel, total	PERMIT REQUIREMENT					2.38	2.1	mg	J/L	0		Grab
Silver, total	SAMPLE MEASUREMENT										01/90 01/90 01/90 01/90 01/90 01/90 01/90	
Silver, total	PERMIT REQUIREMENT					0.24	0.1	mg	ı/L	0	01/90	Grab
Zina total	SAMPLE MEASUREMENT											
Zinc, total	PERMIT REQUIREMENT					1.48	2.3	mg	ı/L	0	01/90	Grab
NAME/TITLE PRINCIPAL EXECUTIVE (ECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE		С	ATE								
ARE POS		SIGNIFICANT PENALTIES BILITY OF FINE AND IMPRI	E, ACCURATE, AND COMPLETE FOR SUBMITTING FALSE INFO SONMENT FOR KNOWING VIOL LTIES UNDER THESE STATUES	ORMATION, INCI ATIONS. SEE 18	LUDING THE USC §	GNATURE OF PRINCIPAL	EXECUTIVE	AREA		IMPER	VEAD	AO DAY
TYPED OR PRINTED	\$10,00	0.00 AND OR MAXIMUM IM	PRISONMENT OF BETWEEN SIX			OFFICER OR AUTHORIZE		CODE	NU	INIDEK	TEAR	MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Pro-Tech Industries

Vancouver, WA 98666-0933

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PARAMETER		(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)	QUALITY OR C (46-53)				NO.	MINIMUM FREQUENCY	SAMPLE
(32-37)		AVERAGE	MAXIMUM	UNITS	MINIMUM	MUM MONTHLY N AVERAGE	MAXIMU DAILY	М	UNITS	EX.	OF ANALYSIS	TYPE
Phenols or Cresols	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT			UNITS MINIMUM MONTHLY AVERAGE DAILY UNITS EX. O.6 mg/L O TELEPHONE 01/90	Grab							
Oil & Grease (total of	SAMPLE MEASUREMENT											
petroleum and vegetable based)	PERMIT REQUIREMENT						50		mg/L	0	01/90	Grab
тто	SAMPLE MEASUREMENT											
110	PERMIT REQUIREMENT						2.13		mg/L	0	01/90	Grab
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
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	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
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